

**APPLICATION DATA SHEET****Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?:: No

Number of copies of CRF::

Title :: PHASE CHANGE MEMORY DEVICE

Attorney Docket Number:: 854163.410

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 9

Small Entity?:: No

Petition included?:: No

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.?:: No

**First Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Italy  
Status:: Full Capacity  
Given Name:: Osama  
Middle Name::  
Family Name:: Khouri  
Name Suffix::  
City of Residence:: Milano  
State or Province of Residence::  
Country of Residence:: Italy  
Street of mailing address:: Via Vespri Siciliani, 1  
City of mailing address:: Milano  
State or Province of mailing address::  
Country of mailing address:: Italy  
Postal or Zip Code of mailing address:: 20146

**Second Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Italy  
Status:: Full Capacity  
Given Name:: Claudio  
Middle Name::  
Family Name:: Resta  
Name Suffix::  
City of Residence:: Villa Di Tirano  
State or Province of Residence::  
Country of Residence:: Italy  
Street of mailing address:: Via Maranta, 5

City of mailing address:: Villa Di Tirano  
State or Province of mailing address::  
Country of mailing address:: Italy  
Postal or Zip Code of mailing address:: 23030

**Correspondence Information**

Correspondence Customer Number :: **38106**

**Representative Information**

Representative Customer Number::		<b>38106</b>
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**Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
Europe	02425098.5	02/21/03	Yes

**First Assignee Information**

Assignee name::	STMicroelectronics S.r.l.
Street of mailing address::	Via C. Olivetti, 2
City of mailing address::	Agrate Brianza
State or Province of mailing address::	
Country of mailing address::	Italy
Postal or Zip Code of mailing address::	20041

**Second Assignee Information**

Assignee name::	OVONYX Inc.
Street of mailing address::	1090 Boeing Street
City of mailing address::	Boise
State or Province of mailing address::	Idaho
Country of mailing address::	US
Postal or Zip Code of mailing address::	83705